

TESTA, HURWITZ & THIBEAULT, LLP **OFFICIAL**

ATTORNEYS AT LAW

HIGH STREET TOWER

125 HIGH STREET

BOSTON, MASSACHUSETTS 02110

OFFICE (617) 248-7000

FAX RECEIVED

MAR 07 2002

FAX (617) 2

GROUP 1600

TELECOPY COVER SHEET

Equipment Operator Contact Number: 617-248-7248. Please call if you do not receive all the pages.

Date: March 6, 2002

TO: **Name:** Examiner Neil S. Levy, Group Art Unit 1616

Company: U.S. Patent and Trademark Office

Address: Washington, DC 20231

Telephone:

Fax: (703) 308-4556

FROM: **Sender:** Brian A. Fairchild

Number of Pages INCLUDING This Cover Sheet: 10

Client: 873/7

Comments:

2300384

FAX RECEIVED

MAR 07 2002

GROUP 1600

PATENT
Attorney Docket No. SUR-004DVCN

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

APPLICANT(S): Sawan et al.
SERIAL NO.: 09/617,566 GROUP NO.: 1616
FILING DATE: July 17, 2000 EXAMINER: Neil S. Levy
TITLE: Contact-Killing Antimicrobial Devices

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, and any document(s) referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile No. (703) 308-4556 on this 6th day of March, 2002.


Sarah J. Blackwell

Attached hereto is/are:

Certificate of Facsimile Transmission (1 pg.); Associate Power of Attorney (1 pg.); Submission of Duplicate Copy of Previously-Filed Response (2 pgs.); Copy of Response of September 18, 2001, including transmittal form (1 pg.), response to restriction requirement (2 pgs.), return postcard, and Express Mail Label No. EL302644845US.

2300253

COPY

SUR-004DVCN
(873/7)

The "RECEIVED" stamp of the Patent Office imprinted hereon acknowledges the filing of:

Transmittal Form (1 pg.); Response to Restriction Requirement (2 pgs.); and return receipt postcard, with each paper having Express Mail Label No. EL302644845US thereon.

Name of Applicant: Sawan et al.

Intf. or Serial Number: 09/617,566

Atty: MHBrodowski/BAFairchild

Date: September 18, 2001



EXPRESS MAIL LABEL NO. EL302644845US

TRANSMITTAL
FORM

Application Serial Number	09/617,566
Filing Date	July 17, 2000
First Named Inventor	Sawan
Group Art Unit	1616
Examiner Name	N. Levy
Attorney Docket No.	SUR-004DVCN
BATCH NO. (after allowance)	Not applicable
Patent No.	Not applicable
Issue Date	Not applicable


ENCLOSURES (check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form
<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]
<input checked="" type="checkbox"/> Response to Restriction Requirement
<input type="checkbox"/> Petition for Extension of Time
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)
<input type="checkbox"/> Formal Drawing(s)
<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal
<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application
<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> CD(s) for large table or computer program
<input type="checkbox"/> Amendment After Allowance
<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Status Inquiry
<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|---|--|--|

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

SIGNATURE BLOCK

Respectfully submitted,

 Date: September 18, 2001
 Reg. No. 41,640
 Tel. No.: (617) 248-7012
 Fax No.: (617) 248-7100
 Michael H. Brodowski
 Attorney for Applicant(s)
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110

2178687